

DISTRICT COURT OF THE KAW NATION

**Drawer 50
698 Grandview Drive
Kaw City, OK 74641
(580) 269-2552 x 111**

Please fill out paperwork completely. Please hand write your signatures. Yellow highlighted items require you to circle a choice.

THANK YOU

This form packet is supplied by the Kaw Nation Court Clerk's Office. Nothing in these forms is to be construed as providing legal advice. It is highly recommended that you review these documents with an attorney. The Kaw Nation Court Clerk, Kaw Nation District Court, nor the Kaw Nation shall be liable for any use of the following forms.

Parties seeking an Order of the Court are responsible for completing all required documents. The Court Clerk cannot fill out the form for you nor can they give out legal advice. The Kaw Nation does not provide lawyers, legal advice, or legal assistance. If you need legal advice or representation, you must retain an attorney at your expense. Your selected Attorney **must** be registered to practice law with the Kaw Nation Bar Association prior to representing you in the Kaw Nation District Court. You may contact the Court Clerk for a current list of KNBA attorneys.

All fees, including service fees, must be paid **at the time of** filing. Fees cannot be waived unless a Paupers Affidavit has been filed and approved by the Judge prior to filing. This form may be requested from the Court Clerk.

INSTRUCTIONS FOR FILING

1. **FILING FEE** - A filing fee of **\$75.00** is required when filing a Petition for Divorce. Most other filings are **\$50.00**. There is no cost to file a Protective Order, but there is a service fee. See below. Please be prepared to inform the Court Clerk as to which type of Process Service you will be utilizing at the time of filing your packet.
2. **SERVICE FEE** - All parties must be notified of the filing of a Petition and any pending hearings. Respondents are allowed twenty (20) days from service of a Petition to file an answer with the Court. It will be at least a month from your file date before a court date will be set unless the Respondent signs a Waiver. A Notice of Hearing and/or Summons may be served by Tribal Police within Kay and Osage County for a Service Fee of **\$50.00**. If the parties reside outside of the Kay and Osage County areas, a private process server may need to be hired for service at a starting rate of **\$99.00**. You will be billed for the remaining due amount. The Notice may also be served through Certified Mail. A Service Fee of **\$17.00** will be assessed for the Court Clerk to mail the Notice.
3. **PUBLICATION FEE** - It is required by law that Notice be given to the Respondent, so it is necessary to have a current mailing and physical address for this person. If you **do**

BE PAID WHEN FILING FORMS. A fee of **\$75.00** (average publication cost) will be assessed. Keep in mind that the fee assessed for publication is an average cost and it could cost more. If the cost is more than \$75.00, you will be responsible for the balance due at the end of publication.

4. To begin the filing process, the following required documents must be submitted to the Court Clerk:
 - Copy of your Driver's License (or State ID)
 - Copy of your Marriage Certificate
 - Copies of Birth Certificates
 - Copies of Death Certificates (if applicable)
 - Copies of CDIB Cards
 - Contact Information Sheet
 - Petition
 - Financial Affidavit (Divorce)
 - Statement of Facts (Guardianship)
 - OK Sex Offenders Registration Affidavit (Adoption, Custody and Guardianship)
 - Child Abuse and Neglect Information System (CANIS) Form
 - Request for Hearing
 - Summons
 - Filing and Service Fees
5. Please ensure that all required documentation has been attached and provided at the time of filing your Petition. Make sure that you completely fill out the documents and attach the required documentation. Documents that are not completely filled out can delay the process of your case. Parties are responsible for completing their own petition forms. The court clerk cannot give legal advice or assist you in filling out the forms.
6. Once your Petition and all required documentation has been received, a Notice of Hearing will be issued by the Court Clerk informing all parties of the date and time of the scheduled hearing.
7. In an adoption, you **MUST** have an attorney. Also, once the Petition is filed, an in-home study must be completed before the adoption can be finalized (unless it is a stepparent adoption).



BACKGROUND CHECK AUTHORIZATION FORM

Last Name: _____ First Name: _____ MI: _____

Maiden Name/Other Names Used: _____

Current Address: _____ City: _____ Zip: _____

Driver's License Number: _____ State Issued: _____

Date of Birth: _____ Social Security Number: _____

Gender: ☐ Male ☐ Female Race: _____

Tribal Affiliation: _____ Enrollment #: _____

Have you resided outside of the state of Oklahoma in the last ten (10) years?

☐ Yes ☐ No

If yes, please list all previous address for the last ten (10) years:

DATES	CITY	STATE

Do you have a current TWIC card? ☐ Yes ☐ No Expires: _____
Attach copy of card front and back

Have you ever pled guilty or no contest to felony charges? ☐ Yes ☐ No

Are you currently charged with a criminal offense and awaiting disposition? ☐ Yes
☐ No

I, _____, authorize and acknowledge that Kaw Nation District Court will use my date of birth, driver's license number and/or social security number to run a criminal and civil background check in accordance with Kaw Nation Law for the purposes of ☐ legal adoption ☐ guardianship.



Signature

Date

Instructions

Complete the following form to request a search of the Child Abuse and Neglect Information System (CANIS) for prospective adoptive parents. The search and report of CANIS information is provided to assist in evaluating the safety of the home in which a child is placed.

A timely completed search requires that:

- all applicable information regarding the applicant is provided, including all current and former names used by the applicant;
- information regarding the stepparent is provided when a stepparent is the prospective adoptive parent. A search report is not required for the biological custodial biological parent;
- the applicant has signed the form;
- written verification from a homestudy provider, adoption agency, or attorney, or a copy of the Petition for Adoption is included;
- when the request is made for the purpose of an international adoption, official documentation from the applicant's child-placing agency, attorney, or the United States Bureau of Citizenship and Immigration Services is provided in writing on business or government letterhead; and
- the form and verification of impending adoption and other applicable documentation is transmitted by:
 - secure email to CANISADOPT@okdhs.org;
 - fax to 405-669-9252; or
 - mail to Oklahoma Department of Human Services
Child Welfare Services - Statewide Hotline LOC #100-B
Child Abuse and Neglect Information System
P.O. Box 25352
Oklahoma City, OK 73125

Please contact CANISADOPT at 405-618-1739 if you have questions.

Please allow four weeks for processing the search request.

Request

Oklahoma Human Services (OKDHS) is requested to conduct a Child Abuse and Neglect Information System search for the adoptive applicants named below.

Adoption Type

- ☐ Domestic child ☐ Domestic infant ☐ Grandparent
☐ International ☐ Stepparent ☐ Tribal ☐ Other relative
☐ Other: _____

Adoptive Applicant One

Adoptive applicant full name

Aliases, including maiden name, former married name, and all other names

Date of birth Social Security number Phone number

Current street address City State ZIP

Years at current residence Previous county of residence

Previous street address City State ZIP Dates resided

Previous street address City State ZIP Dates resided

Previous street address City State ZIP Dates resided

Unsworn Declaration Under Penalty of Perjury

I certify that an adoption is being pursued through _____, attorney, or _____, child-placing agency, and the search report is used for this purpose only. I further certify under penalty of perjury under the laws of the State of Oklahoma that the foregoing is true and correct to the best of my information and belief.

Applicant signature Date

Adoptive Applicant Two

Adoptive applicant full name _____

Aliases, including maiden name, former married name, and all other names _____

Date of birth _____ Social Security number _____ Phone number _____

Current street address _____ City _____ State _____ ZIP _____

Years at current residence _____ Previous county of residence _____

Previous street address _____ City _____ State _____ ZIP _____ Dates resided _____

Previous street address _____ City _____ State _____ ZIP _____ Dates resided _____

Previous street address _____ City _____ State _____ ZIP _____ Dates resided _____

Unsworn Declaration Under Penalty of Perjury

I certify that an adoption is being pursued through _____, attorney, or _____, child-placing agency, and the search report is used for this purpose only. I further certify under penalty of perjury under the laws of the State of Oklahoma that the foregoing is true and correct to the best of my information and belief.

Applicant signature _____ Date _____

Routing

- **Verification of impending adoption must accompany this request.**
- **This request will not be completed when required verifications are not included.**
- Send this completed request and verification by
 - secure email to CANISADOPT@okdhs.org;
 - fax to 405-669-9252; or
 - mail to Oklahoma Human Services
Child Welfare Services - Statewide Hotline LOC #100-B
Child Abuse and Neglect Information System
P.O. Box 25352
Oklahoma City, OK 73125

Please allow four weeks for processing the search request.

CONTACT INFORMATION

Petitioner's Full Name: _____

Previous Names: _____

If Married, To Whom: _____ Date: _____ City/County/State: _____

Divorced or Separated From: _____ Date: _____

Mailing Address (Including County): _____

Physical Address (Including County): _____

Work Address: _____

Home Phone: _____ Work Phone: _____

Cell Phone: _____ Email: _____

CDIB No: _____ Tribe: _____

DOB: _____ SSN: _____

Born in City/County/State: _____ Birth Certificate #: _____

DL No: _____ DL State: _____ DL Exp: _____

Hair Color: _____ Eye Color: _____

Height: _____ Weight: _____

Race: _____

Distinguishing Features (Tattoos, Scars, etc.) _____

Attorney: _____

Respondent's Full Name: _____

Previous Names: _____

If Married, To Whom: _____ Date: _____ City/County/State: _____

Divorced or Separated From: _____ Date: _____

Mailing Address (Including County): _____

Physical Address (Including County): _____

Work Address: _____

Home Phone: _____ Work Phone: _____

Cell Phone: _____ Email: _____

CDIB No: _____ Tribe: _____

DOB: _____ SSN: _____

Born in City/County/State: _____ Birth Certificate #: _____

DL No: _____ DL State: _____ DL Exp: _____

Hair Color: _____ Eye Color: _____

Height: _____ Weight: _____

Race: _____

Distinguishing Features (Tattoos, Scars, etc.) _____

Attorney: _____

IN THE DISTRICT COURT OF KAW NATION
KAW CITY, OKLAHOMA

IN THE MATTER OF THE ADOPTION OF:)
_____,) CASE NO. ADP-20_____.
D.O.B. _____,)
_____,)
D.O.B. _____,)
 A minor child(ren).)

PETITION FOR ADOPTION

COMES NOW, _____ and _____, husband
and wife, and respectfully alleges and states as follows:

- I. That this Court has jurisdiction to hear and decide this matter according to the Kaw Nation Tribal Child Protection Code § 2-27 for the Kaw Nation of Oklahoma, for which this court sits;
- II. That the child(ren), _____ and _____ is/are enrolled/eligible for enrollment with the Kaw Nation of Oklahoma and that the Kaw Nation will have full knowledge of the requested adoption in this Court and is cooperating with the requirements of said adoption as evidenced by the adoptive home study to be filed with this case;
- III. That the Petitioners are husband and wife and were lawfully married on the _____ day of _____, _____, in _____, _____, with a license issued in _____ County, and that their present residence and mailing address is _____;
- IV. That the Petitioner, _____, is a female member of

(Tribal Affiliation)_____/non-Tribal member and born on the ____ day of_____, ____, in _____, _____, and that her occupation is _____, and she is now ____ years of age, and that her full maiden name is _____ (please state your first, middle and maiden name).

That the Petitioner, _____(please state your first, middle and last name), is a male member of (Tribal Affiliation) _____/non-Tribal Member and born on the ____ day of _____, ____, in _____, _____, and that his occupation is _____, and he is now ____ years of age.

That the Petitioner's _____ and _____, further state that his/her relationship (aunt/uncle/etc.) to the child(ren) is _____ to _____, the minor child(ren);

- V. That the child, _____, is a _____ Indian male/female who was born on the ____ day of _____, _____, at the _____ Hospital, _____ County, _____, _____;

That the child, _____, is a _____ Indian male/female who was born on the ____ day of _____, _____, at the _____ Hospital, _____ County, _____, _____;

- VI. The natural mother of said child(ren) is _____, with a mailing address of _____; that the natural father of said child(ren) is _____, with the mailing address of _____

_____/unknown; (Please include full legal names of natural parents);

- VII. That the consent of _____, the natural mother of the named child(ren), to this adoption by the Petitioners is filed with the Court in this case; that the consent of _____, the natural father of the above named child(ren), to this adoption is filed with the Court in this case or is not filed with this case because the father is unknown;
- VIII. That said child(ren), _____, possesses no real or personal property;
- IX. That the Petitioner's desire to adopt said child(ren), _____, and desire that the relationship of parent and child(ren) be fully established between said Petitioner's and said child(ren), and that said child(ren)'s name should be changed from _____ to that of _____, and _____ to that of _____;
- X. That an adoptive home study investigation has already been conducted by the Indian Child Welfare Program of the Kaw Nation of Oklahoma and said report is filed with this Court and shows the Petitioner's to be fit and proper persons to adopt said child(ren);
- XI. That in the best interests of said child, that the Court waive/enter an interlocutory decree and waive/enter the waiting period of _____ months;
- XII. That the Petitioner's, in consideration of the decree of the Honorable Court allowing the adoption of the above named child(ren) by the Petitioner's and

further on consideration of the consent of the natural mother/father of said child(ren), do hereby stipulate and agree with the Court and with said natural mother/father that they will care for, maintain, support and educate said child(ren) during its minority, and do further stipulate and agree to treat said child(ren) in all respects as their own lawful child(ren) should be treated;

XIII. WHEREFORE, _____ premises _____ considered, _____ the _____ Petitioner's, _____ and _____, respectfully pay this Honorable Court to make and enter and order a final decree of adoption of _____ and _____ by the Petitioner's, establishing the relationship of parent and child between said child(ren) and the Petitioner's, and changing the name of said child (ren) from _____ to that of _____ and from _____ to that of _____ and that the Petitioners have all such other and further relief as shall be fit and proper in the premises. Further, that the Court enters a temporary order granting custody to the Petitioner's pending the final hearing on matter.

DATED THIS _____ DAY OF _____, 20____.

PETITIONER'S NAME

PETITIONER'S ADDRESS

PETITIONER'S NAME

PETITIONER'S ADDRESS

SUBSCRIBED AND SWORN TO BEFORE ME THIS ____ DAY OF _____,
_____.

(SEAL)

COURT CLERK
FOR KAW NATION DISTRICT COURT

_____,)
 Petitioner,)
)
 vs.) Case No. _____
)
)
 _____,)
 Respondent.)

IN RE: _____,)
)
DOB: _____) Case No. _____

I am not a person subject to registration under the Oklahoma Sex Offenders Registration Act. I am not married to or living with such a person, or a person who has been convicted of or has charges pending for a felony or any relevant misdemeanor, nor is anyone living with me or frequently present in my home previously been convicted of, or has charges pending for, a felony or any relevant misdemeanor.

Commission No.: _____

**IN THE DISTRICT COURT FOR THE KAW NATION
KAW CITY, OKLAHOMA**

	,)	
Petitioner,))	
))	
vs.))	Case No. _____
))	
	,)	
Respondent.))	

OR

IN RE: _____,)	
)	Case No. _____
DOB: _____)	

REQUEST FOR HEARING

Petitioner, _____, requests this Court schedule a hearing on Petitioner's Petition.

Dated this ____ day of _____, 20__.

Petitioner's Printed Name

Petitioner's Signature

**IN THE DISTRICT COURT FOR THE KAW NATION
KAW CITY, OKLAHOMA**

	,)	
Petitioner,))	
))	
vs.))	Case No. _____
))	
	,)	
Respondent.))	

OR

IN RE: _____,)	
)	Case No. _____
DOB: _____)	

SUMMONS

THE KAW NATION TO/FROM:

List Petitioner's Name and Address	List Respondent's Name and Address
From _____	To _____
_____	_____
_____	_____

To the above-named Respondent:

You are ordered and directed to appear at the District Court for the Kaw Nation, in Kaw City, Oklahoma, on the _____ day of _____, 20____, at 10:00 am.

If you fail to appear and/or file an answer to the Petition attached hereto within twenty (20) days of receiving this Summons, a default judgment may be rendered against you.

You may seek the advice of an attorney in any matter connected with this suit or your answer. Such attorney should be consulted immediately.

Issued this _____ day of _____, 20_____.

Court Clerk

HOW DO YOU WANT THE RESPONDENT TO BE SERVED? ☐ Certified Mail \$17

☐ Process Server \$50 and up

AFFIDAVIT OF SERVICE

SERVICE BY PROCESS SERVER

I, _____, hereby certify that I served this
Summons together with a copy of the Petition upon _____
at _____ am/pm on the _____ day of _____, 20____
and made the return according to law, and that I am duly authorized to endorse
this affidavit, so help me God.

Police Officer/Process Server

First Attempt: _____

Second Attempt: _____

Final Attempt: _____

Subscribed to and sworn to before me this _____ day of _____.
20_____.

Notary Public's Signature: _____

My commission expires: _____

My commission number: _____

CERTIFICATION OF SERVICE BY MAIL

I hereby certify that I mailed copies of the foregoing Summons with a copy of the
Petition attached to the following named parties at the address shown by certified
mail, addressee only, return receipt requested, on the _____ day of
_____, 20_____.

Court Clerk